### Application Data Sheet

### Application Information

Application Type:: Regular Subject Matter:: Utility

Title:: BUSINESS INQUIRIES AND OPERATIONS

FOR MESSAGING SERVICE

Attorney Docket Number:: M61.12-0542

Request for Non-Publication?:: No Suggested Drawing Figure:: 3
Total Drawing Sheets:: 7

Small Entity?::

Petition included?::

Petition Type::

### Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Denmark
Given Name:: Carsten
Family Name:: Sorensen

Name Suffix::

City of Residence:: Kirke Saaby

State or Province of Residence::

Country of Residence:: Denmark
Street of Mailing address:: Fynsvej 6
City of Mailing address:: Kirke Saaby

State of Province of mailing address::

Country of mailing address:: Denmark
Postal or Zip Code:: 4060

#### Correspondence Information

Name:: Joseph R. Kelly

Street of mailing address:: Westman, Champlin & Kelly

900 Second Avenue South, Suite 1600

City of mailing address:: Minneapolis State or Province of mailing address:: MN

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# Representative Information

Representative	Registration	Representative Name:		
Designation::	Number::			
Primary	20147	Nickolas E. Westman		
Primary	34797	Judson K. Champlin		
Primary	34847	Joseph R. Kelly		
Primary	36188	Steven M. Koehler		
Primary	34557	David D. Brush		
Primary	38354	John D. Veldhuis-Kroeze		
Primary	39758	Theodore M. Magee		
Primary	35612	Deirdre Megley Kvale		
Primary	42413	Christopher R. Christenson		
Primary	41885	Brian D. Kaul		
Primary	45466	Nathan M. Rau		
Primary	45844	Christopher L. Holt		
Primary	45956	Alan G. Rego		
Primary	48516	Todd R. Fronek		
Primary	49027	Linda P. Ji		
Primary	53675	Leanne R. Taveggia		
Primary	24383	Robert M. Angus		
Primary	32015	David C. Bohn		
Primary	30214	Z. Peter Sawicki		

Primary	48774	Peter J. Ims
Primary	51655	Bryan F. Erickson

## Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This application			MM/DD/YY

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
		MM/DD/YY	Yes or No

## Assignee Information

Assignee name:: Microsoft Corporation

Street of mailing address:: One Microsoft Way

City of mailing address:: Redmond

State or Province of mailing address:: Washington

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98052